B - FEE(S) TRANSMITTAL

Complete and selled this form, together with applicable fee(s), to: Mail DEC 2 3 2005

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

(571) 273-2885 or Fax

INSTANCE IN THE PROPERTY OF TH maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

35159

7590

09/22/2005

TARO PHARMACEUTICALS **5 SKYLINE DRIVE** HAWTHORNE, NY 10532

12/27/2005 MAHMED2 00000012 502392 09534960

01 FC:1501 02 FC:8001 1400.00 DA

9.00 DA

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

positor's name)	tt (De	Ellial	rie Ma	May	Ann
(Signature)	ligod	mce	avie) ma	arr
(Date)	<i>085</i>	QO, 6	we	uni	Nec
	·				

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/534.960	03/27/2000	Michael Friedman	3940/0K188	3862

TITLE OF INVENTION: CONTROLLED DELIVERY SYSTEM OF ANTIFUNGAL AND KERATOLYTIC AGENTS FOR LOCAL TREATMENT OF FUNGAL INFECTIONS

	T		<u>.</u>	T	T T	· · · · · · · · · · · · · · · · · · ·
APPLN. TYPE	SMALL ENTITY	ISSUE FEE		PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400		\$0	\$1400	12/22/2005
EXAMINER		ART UNI	Т	CLASS-SUBCLASS	7	
HOWARD, SHARON LEE		1615		424-061000	-	•
CFR 1.363). Change of correspon Address form PTO/SB/1. "Fee Address" indica PTO/SB/47; Rev 03-02 Number is required. ASSIGNEE NAME ANI PLEASE NOTE: Unless recordation as set forth in the ANI NAME OF ASSIGNE	tion (or "Fee Address" Indica or more recent) attached. Use D RESIDENCE DATA TO B s an assignee is identified be n 37 CFR 3.11. Completion	Correspondence ation form of a Customer E PRINTED ON T clow, no assignee cof this form is NOT	(1) the na or agents (2) the na registered 2 registered listed, no HE PATEN a substitute	nting on the patent front page, I mes of up to 3 registered pate OR, alternatively, me of a single firm (having as attorney or agent) and the nared patent attorneys or agents. It name will be printed. T (print or type) Dear on the patent. If an assign for filling an assignment. CE: (CITY and STATE OR CO	a member a 2 2 3 3 3 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
				patent): 🗖 Individual 🖼		
1a. The following fee(s) are	enclosed:		Payment of	Fee(s): in the amount of the fee(s) is en	nclosed.	
	small entity discount permitte		Payment by credit card. Form PTO-2038 is attached.			
Advance Order - # o	· o ·	*	~ <i>/</i> '	ector is hereby authorized by count Number		redit any overpayment, to
	(from status indicated above		b. Applic	cant is no longer claiming SMA	LL ENTITY status. See 37 CF	R 1.27(g)(2).
The Director of the USPTO NOTE: The Issue Fee and F interest as shown by the rec	is requested to apply the Issu Publication Fee (if required) vords of the United States Pate	te Fee and Publicate vill not be accepted and Trademark	ion Fee (if and from anyon Office.	ny) or to re-apply any previous e other than the applicant; a reg	ly paid issue fee to the applicat istered attorney or agent; or the	ion identified above. e assignee or other party i

Typed or printed name `_

Registration No.

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.